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# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10679746  
X11921A

## CLAIMS AS FILED - PART I

|   | (Column 1)    | (Column 2)   |
|---|---------------|--------------|
| TOTAL CLAIMS  | 25            |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 25 minus 20 = | 5            |
| INDEPENDENT CLAIMS  | 3 minus 3 =   | 0            |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

SMALL ENTITY  
TYPE ☐OR OTHER THAN  
SMALL ENTITY

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 385.00 |
| X\$ 9=    |        |
| X43=      |        |
| +145=     |        |
| TOTAL     |        |

| RATE      | FEE    |
|-----------|--------|
| BASIC FEE | 770.00 |
| X\$18=    | 90     |
| X86=      |        |
| +290=     |        |
| TOTAL     | 860    |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

10/6/03

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT A   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 2.5                              | Minus                              | **            |
| Independent   | 3                                | Minus                              | and 3         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

SMALL ENTITY

OR OTHER THAN  
SMALL ENTITY

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

4-3-6

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT B   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   | 25                               | Minus                              | ** 25         |
| Independent   | 3                                | Minus                              | and 3         |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

|   | (Column 1)                       | (Column 2)                         | (Column 3)    |
|---|----------------------------------|------------------------------------|---------------|
| AMENDMENT C   | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total   |                                  | Minus                              | **            |
| Independent   |                                  | Minus                              | and           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |                                    |               |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$ 9=              |                        |
| X43=                |                        |
| +145=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

| RATE                | ADDI-<br>TIONAL<br>FEE |
|---------------------|------------------------|
| X\$18=              |                        |
| X86=                |                        |
| +290=               |                        |
| TOTAL<br>ADDIT. FEE |                        |

- \* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
  - \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
  - \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.